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## **Remarks to the Joint Oireachtas Committee on Health on issues relating to homecare including recruitment issues**

9 February 2022



**Rialtas na hÉireann**  
Government of Ireland



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Thank you for the invitation to present Age Action’s views.

Age Action advocates for a society that enables all older people to participate and to live full, independent lives.

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There is a growing consensus that the direction of policy must be to support people to age in place in their communities, and “to live in their own home with dignity and independence for as long as possible.”<sup>1</sup>

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The issue of home supports was raised by many people responding to Age Action’s pre-Budget survey of people’s lived experience.

Many people told us they wanted to see more supports to allow them and their loved ones to live at home for longer, and many said they did not want to be forced into a nursing home.

As one person said to us:

[We need] “Big movement on the expansion of home care. This is critically important for older people who do not wish to be warehoused for the last years of their lives. Older people need to be valued rather than be seen as a burden.”

And another person said:

“The thousands of carers in Ireland should be more respected and rewarded, and not taken for granted!”

We do need to place greater value on care in our society. And if we appreciate the value of care, we will also properly value care workers – paid and unpaid.

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The European Commission’s country report on long-term care in Ireland highlights many of the problems that the statutory homecare system needs to overcome.<sup>2</sup>

One major difficulty they identified is the lack of national data on the provision of care, and on the need for care – including unmet need.

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<sup>1</sup> Government of Ireland (2020) *Housing Options for our Ageing Population*.  
<https://www.gov.ie/en/publication/ea33c1-housing-options-for-our-ageing-population-policy-statement/>  
<sup>2</sup> <https://op.europa.eu/en/publication-detail/-/publication/b39728e3-cd83-11eb-ac72-01aa75ed71a1>

It makes no sense to make decisions about investing in training and staff without being guided by a nationwide analysis of what exactly is needed so that we can reimagine homecare, not just patch up a system that is fundamentally not working for many people.

Another problem the European Commission report identified was the inequity between different HSE regions, where different levels of resources and different rules apply (for example about compensation for travel).

They also raised concern about the level of unregulated care activity, including informal employment within people's own homes.

Finally, they identified that (I quote) "the challenges ... are huge in Ireland." Specifically, the challenges are to ensure "a quantitatively and qualitatively adequate LTC [long-term care] workforce to meet the rising demand for LTC [long-term care] and providing a choice and support for informal carers".

They specify that "the training infrastructure and degree of professional recognition of the value of the sector are low", there are low levels of training in the sector, and there is a high level of informal work in the sector.

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In October 2021, Minister of State Mary Butler reported that waiting lists for home care were greatly reduced due to extra funding during COVID, but that the HSE now faced difficulty in recruiting care workers.<sup>3</sup>

Clearly, this is going to be a problem going forward unless care jobs come with decent pay and conditions, commensurate with the significant value of care work, as well as opportunities for training and career progression.

The provisions of the ILO Domestic Workers Convention 2011 must also be adhered to and built on, to ensure decent working conditions and protections. Given that Ireland has historically relied heavily on EU and non-EU workers in social care, there is a need to protect workers from exploitation (especially where their right to remain in Ireland is tied to their employer).

Equally, we should ensure that any existing workers who are outside of the formal migration system have a pathway to full documentation.

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The World Health Organisation's Global Report on Ageism warns that there is evidence of ageism in the provision of long-term care to older people, for example in terms of controlling language, patronizing patterns of communication or making

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<sup>3</sup> <https://www.oireachtas.ie/en/debates/question/2021-10-19/96/speech/359/>

unfounded assumptions about older person's preferences, sexuality or capabilities.<sup>4</sup> Standards for homecare, and staff training, must ensure address these issues.

\* \* \*

Services delivering home supports – whether voluntary, private or public – should all be explicitly brought under the scope of the Public Sector Equality and Human Rights Duty.

That in turn requires that staff are sufficiently trained to be able to prevent discrimination – including age discrimination – and to protect the human rights of those receiving services.

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Finally, the recipients of homecare should be included in the co-design of the specific service and type of support that they wish to receive. Services that are being delivered in people's homes should fit around people's lifestyles and preferences, not force people to comply with a one-size-fits-all model imposed from outside.

This requires sophistication in how home supports are managed, so that staff are given the necessary permission to be flexible and responsive to people's needs.

At the end of the day, homecare services should never lose sight of the fundamental goal of providing people with care so that they can live with dignity as independently as possible, for as long as possible.

**ENDS**

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<sup>4</sup> <https://www.who.int/teams/social-determinants-of-health/demographic-change-and-healthy-ageing/combating-ageism/global-report-on-ageism>